



Jim Doyle  
Governor

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**State of Wisconsin**

**Department of Health and Family Services**

**DIVISION OF HEALTH CARE FINANCING**

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DATE: September 13, 2004

TO: County Departments of Social Services / Human Services

FROM: James J. Vavra, Director  
Bureau of Fee for Service Health Care Benefits  
Wisconsin Division of Health Care Financing

SUBJECT: For Public Review and Comment  
Proposed Changes to Inpatient and Outpatient Hospital State Plan  
Effective July 1, 2004

Enclosed is the proposed amendment to the Wisconsin State Plan for reimbursement of inpatient and outpatient hospital services under the Wisconsin Medicaid program (WMP). The proposed amendments are retroactive to July 1, 2004.

According to federal regulation, the enclosed material is to be available for public review in the office of each county department of social services or human services. These documents should be available during normal office hours.

**COMMENTS**

Written comments on the proposed changes should be submitted to the following FAX or mailing address by Thursday, September 23, 2004.

FAX (608) 266-1096

Hospital Unit, State Plan Comments  
Division of Health Care Financing  
P. O. Box 309  
Madison, WI 53701-0309

Comments must be submitted in writing. Comments received after the above date may not be considered.

Comments received will be available for public review between the hours of 7:45 a.m. and 4:30 p.m. in room 350 of the State Office Building at One West Wilson Street, Madison, Wisconsin.

If there are questions on the proposed changes, submit to the above address or telephone David Bodoh of the hospital unit at (608) 267-9589. (Voice/TDD 1-800-362-3002)